

## **APPENDIX A – QUESTIONNAIRE**

**1999**

### **Wisconsin Youth Risk Behavior Survey High School Questionnaire**

## Wisconsin 1999 Youth Risk Behavior Survey

This survey is about health behavior. It has been developed so you can tell us what you do that may affect your health. The information you give will be used to develop better health education for young people like yourself.

DO NOT write your name on this survey. The answers you give will be kept private. No one will know what you write. Answer the questions based on what you really do.

Completing the survey is voluntary. Whether or not you answer the questions will not affect your grade in this class. If you are not comfortable answering a question, just leave it blank.

The questions that ask about your background will be used only to describe the types of students completing this survey. The information will not be used to find out your name. No names will ever be reported.

Make sure to read every question. Fill in the ovals completely. When you are finished, follow the instructions of the person giving you the survey.

*Thank you very much for your help*

**Directions**

Use a #2 pencil only.

Make dark marks.

Fill in a response like this: A B ● D.

To change your answer, erase completely.

Choose only one answer for each question  
(except question 4).

1. How old are you?

- a. 12 years old or younger
- b. 13 years old
- c. 14 years old
- d. 15 years old
- e. 16 years old
- f. 17 years old
- g. 18 years old or older

2. What is your gender?

- a. Female
- b. Male

3. In what grade are you?

- a. 9th grade
- b. 10th grade
- c. 11th grade
- d. 12th grade
- e. Ungraded or other grade

4. How do you describe yourself? *Select one or more responses.*

- a. American Indian or Alaska Native
- b. Asian
- c. Black or African American
- d. Hispanic or Latino
- e. Native Hawaiian or Other Pacific Islander
- f. White

5. How tall are you without your shoes on?

Directions: Write your height in the shaded blank boxes and fill in the matching oval below each number on your answer sheet.

Example:

HEIGHT	
Feet	Inches
<b>5</b>	<b>11</b>
③	
④	①
●	②
⑥	③
⑦	④
	⑤
	⑥
	⑦
	⑧
	⑨
	⑩
	●

6. How much do you weigh without your shoes on?

Directions: Write your weight in the shaded blank boxes and fill in the matching oval below each number on your answer sheet.

Example:

Weight Pounds		
<b>1</b>	<b>5</b>	<b>2</b>
●		
②	①	①
③	②	●
	③	③
	④	④
	●	⑤
	⑥	⑥
	⑦	⑦
	⑧	⑧
	⑨	⑨

**The next 21 questions ask about personal safety.**

7. How often do you wear a seat belt when **riding in a car** driven by someone else?
- a. Never
  - b. Rarely
  - c. Sometimes
  - d. Most of the time
  - e. Always
8. **When you rode a motorcycle** during the past 12 months, how often did you wear a helmet?
- a. I did not ride a motorcycle during the past 12 months
  - b. Never wore a helmet
  - c. Rarely wore a helmet
  - d. Sometimes wore a helmet
  - e. Most of the time wore a helmet
  - f. Always wore a helmet
9. **When you rode a bicycle** during the past 12 months, how often did you wear a helmet?
- a. I did not ride a bicycle during the past 12 months
  - b. Never wore a helmet
  - c. Rarely wore a helmet
  - d. Sometimes wore a helmet
  - e. Most of the time wore a helmet
  - f. Always wore a helmet
10. During the past 30 days, how many times did you **ride** in a car or other vehicle **driven by someone who had been drinking alcohol**?
- a. 0 times
  - b. 1 time
  - c. 2 or 3 times
  - d. 4 or 5 times
  - e. 6 or more times

11. During the past 30 days, how many times did you **drive** a car or other vehicle **when you had been drinking alcohol**?
- a. 0 times
  - b. 1 time
  - c. 2 or 3 times
  - d. 4 or 5 times
  - e. 6 or more times
12. During the past 30 days, on how many days did you carry **a weapon** such as a gun, knife, or club?
- a. 0 days
  - b. 1 day
  - c. 2 or 3 days
  - d. 4 or 5 days
  - e. 6 or more days
13. During the past 30 days, on how many days did you carry **a gun**?
- a. 0 days
  - b. 1 day
  - c. 2 or 3 days
  - d. 4 or 5 days
  - e. 6 or more days
14. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club **on school property**?
- a. 0 days
  - b. 1 day
  - c. 2 or 3 days
  - d. 4 or 5 days
  - e. 6 or more days
15. During the past 30 days, on how many days did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?
- a. 0 days
  - b. 1 day
  - c. 2 or 3 days
  - d. 4 or 5 days
  - e. 6 or more days

16. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club **on school property**?

- a. 0 times
- b. 1 time
- c. 2 or 3 times
- d. 4 or 5 times
- e. 6 or 7 times
- f. 8 or 9 times
- g. 10 or 11 times
- h. 12 or more times

17. During the past 12 months, how many times were you in a physical fight?

- a. 0 times
- b. 1 time
- c. 2 or 3 times
- d. 4 or 5 times
- e. 6 or 7 times
- f. 8 or 9 times
- g. 10 or 11 times
- h. 12 or more times

18. During the past 12 months, how many times were you in a physical fight in which you were injured and had to be treated by a doctor or nurse?

- a. 0 times
- b. 1 time
- c. 2 or 3 times
- d. 4 or 5 times
- e. 6 or more times

19. During the past 12 months, how many times were you in a physical fight **on school property**?

- a. 0 times
- b. 1 time
- c. 2 or 3 times
- d. 4 or 5 times
- e. 6 or 7 times
- f. 8 or 9 times
- g. 10 or 11 times
- h. 12 or more times

20. The **last time** you were in a physical fight, with whom did you fight?

- a. I have never been in a physical fight
- b. A total stranger
- c. A friend or someone I knew
- d. A boyfriend, girlfriend, or date
- e. A parent, brother, sister, or other family member
- f. Someone not listed above
- g. More than one of the persons listed above

21. Have you ever been forced, either verbally or physically, to take part in sexual activity?

- a. I have never taken part in sexual activity
- b. Yes
- c. No
- d. I'm not sure

22. Have you ever forced, either verbally or physically, someone to take part in sexual activity?

- a. I have never taken part in sexual activity
- b. Yes
- c. No
- d. I'm not sure

23. Have you ever been threatened or hurt because someone thought you were gay, lesbian, or bisexual?

- a. Yes
- b. No
- c. I'm not sure

24. Have you ever been threatened or hurt because of your race or skin color?

- a. Yes
- b. No
- c. I'm not sure

25. Have you ever been "sexually harassed," however you may define this, at your school?

- a. Yes
- b. No
- c. I'm not sure

26. When you are at school, how safe do you feel from physical harm?

- a. Always feel safe
- b. Usually feel safe
- c. Usually don't feel safe

27. When you are on your way to or from school, how safe do you feel from physical harm?

- a. Always feel safe
- b. Usually feel safe
- c. Usually don't feel safe

**Sometimes people feel so depressed about the future that they may consider attempting suicide, that is, taking some action to end their own life. The next four questions ask about attempted suicide.**

28. During the past 12 months, did you ever feel so sad or hopeless almost every day for **two weeks or more in a row** that you stopped doing some usual activities.

- a. Yes
- b. No

29. During the past 12 months, did you ever **seriously** consider attempting suicide?

- a. Yes
- b. No

30. During the past 12 months, how many times did you actually attempt suicide?

- a. 0 times
- b. 1 time
- c. 2 or 3 times
- d. 4 or 5 times
- e. 6 or more times

31. **If you attempted suicide** during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?

- a. **I did not attempt suicide** during the past 12 months
- b. Yes
- c. I attempted suicide, but no treatment was required

**The next ten questions ask about tobacco use.**

32. How old were you when you smoked a whole cigarette for the first time?

- a. I have never smoked a whole cigarette
- b. 8 years old or younger
- c. 9 or 10 years old
- d. 11 or 12 years old
- e. 13 or 14 years old
- f. 15 or 16 years old
- g. 17 years old or older

33. Have you ever smoked cigarettes regularly, this is, at least one cigarette every day for 30 days?

- a. Yes
- b. No

34. During the past 30 days, on how many days did you smoke cigarettes?

- a. 0 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 to 19 days
- f. 20 to 29 days
- g. All 30 days

35. During the past 30 days, on the days you smoked, how many cigarettes did you smoke **per day**?

- a. I did not smoke cigarettes during the past 30 days
- b. Less than 1 cigarette per day
- c. 1 cigarette per day
- d. 2 to 5 cigarettes per day
- e. 6 to 10 cigarettes per day
- f. 11 to 20 cigarettes per day
- g. More than 20 cigarettes per day

36. During the past 30 days, how did you **usually** get your own cigarettes? (Select only **one** response.)

- a. I did not smoke cigarettes during the past 30 days
- b. I bought them in a store such as a convenience store, supermarket, or gas station
- c. I bought them from a vending machine
- d. I gave someone else money to buy them for me
- e. I borrowed them from someone else
- f. I stole them
- g. I got them some other way

37. During the past 30 days, on how many days did you smoke **cigars, cigarillos, or little cigars**?

- a. 0 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 to 19 days
- f. 20 to 29 days
- g. All 30 days

38. During the past 30 days, on how many days did you smoke cigarettes **on school property**?

- a. 0 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 to 19 days
- f. 20 to 29 days
- g. All 30 days

39. Have you ever tried **to quit** smoking cigarettes?

- a. Yes
- b. No

40. During the past 30 days, on how many days did you use **chewing tobacco or snuff**, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen?

- a. 0 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 to 19 days
- f. 20 to 29 days
- g. All 30 days

41. Is there an adult in your household who is a regular smoker?

- a. Yes
- b. No

**The next five questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.**

42. It is important to me not to use alcohol or other drugs.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

43. How old were you when you had your first drink of alcohol other than a few sips?

- a. I have never had a drink of alcohol other than a few sips
- b. 8 years old or younger
- c. 9 or 10 years old
- d. 11 or 12 years old
- e. 13 or 14 years old
- f. 15 or 16 years old
- g. 17 years old or older

44. During the past 30 days, on how many days did you have at least one drink of alcohol?

- a. 0 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 to 19 days
- f. 20 to 29 days
- g. All 30 days

45. During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours?

- a. 0 days
- b. 1 day
- c. 2 days
- d. 3 to 5 days
- e. 6 to 9 days
- f. 10 to 19 days
- g. 20 or more days

46. During the past 30 days, on how many days did you have at least one drink of alcohol **on school property**?

- a. 0 days
- b. 1 or 2 days
- c. 3 to 5 days
- d. 6 to 9 days
- e. 10 to 19 days
- f. 20 to 29 days
- g. All 30 days

**The next four questions ask about marijuana use. Marijuana also is called grass or pot.**

47. How old were you when you tried marijuana for the first time?

- a. I have never tried marijuana
- b. 8 years old or younger
- c. 9 or 10 years old
- d. 11 or 12 years old
- e. 13 or 14 years old
- f. 15 or 16 years old
- g. 17 years old or older

48. During your life, how many times have you used marijuana?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 to 99 times
- g. 100 or more times

49. During the past 30 days, how many times did you use marijuana?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

50. During the past 30 days, how many times did you use marijuana **on school property**?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

**The next ten questions ask about cocaine and other drugs.**

51. During your life, how many times have you used **any** form of cocaine, including powder, crack, or freebase?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

52. During the past 30 days, how many times did you use **any** form of cocaine, including powder, crack, or freebase?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times



53. During your life, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

54. During the past 30 days, how many times have you sniffed glue, breathed the contents of aerosol spray cans, or inhaled any paints or sprays to get high?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

55. During your life, how many times have you used **heroin** (also called smack, junk, or China White)?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

56. During your life, how many times have you used **methamphetamines** (also called speed, crystal, crank, or ice)?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

57. During your life, how many times have you taken **steroid pills or shots** without a doctor's prescription?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

58. During your life, how many times have you used LSD or "acid"?

- a. 0 times
- b. 1 or 2 times
- c. 3 to 9 times
- d. 10 to 19 times
- e. 20 to 39 times
- f. 40 or more times

59. During your life, how many times have you used a needle to inject any **illegal** drug into your body?

- a. 0 times
- b. 1 time
- c. 2 or more times

60. During the past 12 months, has anyone offered, sold, or given you an illegal drug **on school property**?

- a. Yes
- b. No

**The next 2 questions ask about AIDS education and information.**

61. Have you ever been taught about AIDS or HIV infection in school?

- a. Yes
- b. No
- c. Not sure

62. Have you ever talked about AIDS or HIV infection with your parents or other adults in your family?

- a. Yes
- b. No
- c. Not sure

**The next nine questions ask about sexual behavior.**

63. It is important to me to delay having sexual intercourse until ....(select only one response).
- a. I'm married
  - b. I'm engaged
  - c. I'm an adult, and in a long-term committed relationship
  - d. I'm in love
  - e. I finish high school
  - f. It is not important to me to delay having sexual intercourse
64. Have you ever had sexual intercourse?
- a. Yes
  - b. No
65. How old were you when you had sexual intercourse for the first time?
- a. I have never had sexual intercourse
  - b. 11 years old or younger
  - c. 12 years old
  - d. 13 years old
  - e. 14 years old
  - f. 15 years old
  - g. 16 years old
  - h. 17 years old or older
66. During your life, with how many people have you had sexual intercourse?
- a. I have never had sexual intercourse
  - b. 1 person
  - c. 2 people
  - d. 3 people
  - e. 4 people
  - f. 5 people
  - g. 6 or more people
67. During the past 3 months, with how many people did you have sexual intercourse?
- a. I have never had sexual intercourse
  - b. I have had sexual intercourse, but not during the past 3 months
  - c. 1 person
  - d. 2 people
  - e. 3 people
  - f. 4 people
  - g. 5 people
  - h. 6 or more people

68. Did you drink alcohol or use drugs before you had sexual intercourse the **last time**?
- a. I have never had sexual intercourse
  - b. Yes
  - c. No
69. The **last time** you had sexual intercourse, did you or your partner use a condom?
- a. I have never had sexual intercourse
  - b. Yes
  - c. No
70. The **last time** you had sexual intercourse, what **one** method did you or your partner use to **prevent pregnancy**? (Select only **one** response.)
- a. I have never had sexual intercourse
  - b. No method was used to prevent pregnancy
  - c. Birth control pills
  - d. Condoms
  - e. Depo-Provera (injectable birth control)
  - f. Withdrawal
  - g. Some other method
  - h. Not sure
71. How many times have you been pregnant or gotten someone pregnant?
- a. 0 times
  - b. 1 time
  - c. 2 or more times
  - d. Not sure

**The next six questions ask about body weight.**

72. How do **you** describe your weight?
- a. Very underweight
  - b. Slightly underweight
  - c. About the right weight
  - d. Slightly overweight
  - e. Very overweight
73. Which of the following are you trying to do about your weight?
- a. **Lose** weight
  - b. **Gain** weight
  - c. **Stay** the same weight
  - d. I am **not trying to do anything** about my weight

74. During the past 30 days, what have you done most frequently to lose weight or keep from gaining weight?

- a. Exercise
- b. Eat less food, fewer calories, or foods low in fat
- c. Go without eating for 24 hours or more
- d. Take diet pills, powders, or liquids without a doctor's advice to lose weight or to keep from gaining weight? (**Do not** include meal replacement products such as Slim Fast).
- e. Vomit or take laxatives
- f. I have done nothing during the past 30 days

75. Yesterday, how many times did you eat fruit or drink fruit juice?

- a. 0 times
- b. 1 time
- c. 2 times
- d. 3 times
- e. 4 times
- f. 5 times
- g. 6 or more times

76. Yesterday, how many times did you eat vegetables or drink vegetable juice?

- a. 0 times
- b. 1 time
- c. 2 times
- d. 3 times
- e. 4 times
- f. 5 times
- g. 6 or more times

77. Yesterday, how many times did you drink milk or eat cheese or yogurt?

- a. 0 times
- b. 1 time
- c. 2 times
- d. 3 times
- e. 4 times
- f. 5 times
- g. 6 or more times

**The next five questions ask about physical activity.**

78. On how many of the past 7 days did you exercise or participate in physical activity for **at least 20 minutes that made you sweat and breathe hard**, such as basketball, soccer, running, swimming laps, fast bicycling, fast dancing, or similar aerobic activities?

- a. 0 days
- b. 1 day
- c. 2 days
- d. 3 days
- e. 4 days
- f. 5 days
- g. 6 days
- h. 7 days

79. On how many of the past 7 days did you participate in physical activity for **at least 30 minutes** that did **not** make you sweat or breathe hard, such as fast walking, slow bicycling, skating, pushing a lawn mower, or mopping floors?

- a. 0 days
- b. 1 day
- c. 2 days
- d. 3 days
- e. 4 days
- f. 5 days
- g. 6 days
- h. 7 days

80. In an average week when you are in school, on how many days do you go to physical education (PE) classes?

- a. 0 days
- b. 1 day
- c. 2 days
- d. 3 days
- e. 4 days
- f. 5 days

81. During an average physical education (PE) class, how many minutes do you spend actually exercising or playing sports?

- a. I do not take PE
- b. Less than 10 minutes
- c. 10 to 20 minutes
- d. 21 to 30 minutes
- e. More than 30 minutes

82. During the past 12 months, on how many sports team did you play? (Do not include PE Classes)

- a. 0 team
- b. 1 team
- c. 2 teams
- d. 3 or more teams

**The next 14 items are general questions about you. A few questions refer to your parents. In this survey "parents" means the adults who are most responsible for raising you. They could be foster parents, step-parents, or guardians. If you live in a single parent family, answer for that adult.**

83. At school I try hard to do my best work.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

84. What best describes the grades you get in school?

- a. Mostly A's
- b. About half A's and B's
- c. About half B's and C's
- d. About half C's and D's
- e. Failing (D's or F's)

85. How important is it to you to help other people?

- a. Not important
- b. Somewhat important
- c. Quite important
- d. Extremely important

86. I care about other people's feelings.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

87. I stand up for my beliefs.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

88. I am good at making decisions and following through on them.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

89. I am good at making friends.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

90. I can resist negative peer pressure and dangerous situations.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

91. My family loves me and gives me help and support when I need it.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

92. Besides your parents, how many adults would you feel comfortable seeking help from if you had an important question affecting your life?

- a. None
- b. 1 adult
- c. 2 adults
- d. 3 adults
- e. 4 adults
- f. 5 adults or more

93. My teachers really care about me and give me a lot of encouragement.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

94. My parents have clear rules and standards for my behavior.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

95. How often do your parents ask where you are going or with whom you will be?

- a. All the time
- b. Most of the time
- c. Some of the time
- d. Seldom or never

96. My school has clear rules and consequences for behavior.

- a. Strongly agree
- b. Agree
- c. Not sure
- d. Disagree
- e. Strongly disagree

**This is the end of the survey.  
Thank you very much for your help.**